

Standard Forms

- o Proposal Cover Page
- o Proposal Abstract
- o Total Budget Summary
- o Yearly Budget Summary
- o Current and Pending Support
- o Certification Regarding Debarment, Suspension, and Other Responsibility Matters
(signature is required for all proposals)
- o Certification Regarding Drug-Free Workplace Requirements
(signature is required for all proposals)
- o Certification Regarding Lobbying, if total multi-year funding >\$100,000
(signature is required for all proposals)

REQUIRED CONTENTS OF STANDARD PROPOSAL

COVER SHEETS

COVER PAGE
PROPOSAL ABSTRACT
BUDGET SUMMARY FOR TOTAL
BUDGET SUMMARY FOR EACH YEAR
CURRENT AND PENDING SUPPORT
TABLE OF CONTENTS (Optional)

MAIN BODY OF PROPOSAL (Limited to 15 pages)

RESEARCH OBJECTIVES
DETAILED WORK PLAN
EXPECTED RESULTS
RELEVANCE OF PROPOSED WORK
ROLE OF PI, CO-I, AND OTHER PERSONNEL
SUPPORTING FACILITIES
REFERENCES

RESUMES OF PRINCIPAL INVESTIGATOR AND CO-INVESTIGATORS

DETAILED BUDGETARY AND ADMINISTRATIVE INFORMATION

CERTIFICATIONS

CERTIFICATION REGARDING DRUG FREE WORKPLACE
CERTIFICATION REGARDING DEBARMENT, SUSPENSION,
AND OTHER RESPONSIBILITY MATTERS
CERTIFICATION REGARDING LOBBYING (IF REQUIRED)

**PLANETARY INSTRUMENT DEFINITION
AND DEVELOPMENT PROGRAM**

Log No. _____

Date Received: _____

Do not write in the shaded area.

NRA #: _____

Date Submitted: _____

INSTRUMENT DISCIPLINE (Please check all boxes appropriate to this proposal):

- | | | |
|---|---|---|
| <input type="radio"/> SURFACE/IN SITU | <input type="radio"/> OPTICAL SYSTEMS | <input type="radio"/> PARTICLES AND
FIELDS |
| <input type="radio"/> RADIO MILLIMETER
SUBMILLIMETER | <input type="radio"/> BASIC COMPONENTS
(e.g. detectors, refrigerators
etc.) | <input type="radio"/> OTHER |

TARGET MISSION (Please check all boxes appropriate to this proposal)

- | | | | |
|---------------------------------|----------------------------|---|-------------------------------|
| <input type="radio"/> DISCOVERY | <input type="radio"/> MARS | <input type="radio"/> OUTER SOLAR
SYSTEM | <input type="radio"/> ORIGINS |
|---------------------------------|----------------------------|---|-------------------------------|

Proposal Title: _____

Principal Investigator (Name): _____

Institution: _____

Address: _____

City/State/Zip Code: _____

Telephone: (____) _____ Fax: (____) _____

E-Mail Address: _____

Institution Contact or Business Representative:

Telephone: (____) _____ Fax: (____) _____

Signature: _____

Please list all names and institutions below (use separate sheet if necessary)

Co-Investigators:

Institutions:

Proposed Duration of Project: _____ months

Desired Start Date: _____ End Date: _____

Budget Request:

Year 1

Year 2

Year 3

\$ _____

\$ _____

\$ _____

Total Funding Requested: \$ _____

PROPOSAL ABSTRACT

PROPOSAL TITLE: _____

PRINCIPAL INVESTIGATOR/INSTITUTION: _____

Type single-spaced within the space provided below. List:

- 1) Goals, overall objectives, and justification of the work;
- 2) Progress and accomplishments, if supported in previous years
- 3) PI/Co-I's relevant publications on separate page (list in this way: Smith, A. B.: Spectroscopy of Comet Halley. AP. J. 123, 25-37, 1987).

DO NOT USE ADDITIONAL SHEETS.

BUDGET SUMMARY

FROM: _____ TO _____

TITLE OF INVESTIGATION:

PRINCIPAL INVESTIGATOR / INSTITUTION:

	A	<u>NASA USE ONLY</u>	
		B	C
1. Direct Labor (salaries, wages, and fringe benefits)	_____	_____	_____
2. Other Direct Costs:			
a. Subcontracts	_____	_____	_____
b. Consultants	_____	_____	_____
c. Equipment	_____	_____	_____
d. Supplies	_____	_____	_____
e. Travel	_____	_____	_____
f. Other	_____	_____	_____
3. Indirect Costs	_____	_____	_____
4. Other Applicable Costs	_____	_____	_____
5. Subtotal--Estimated Costs	_____	_____	_____
6. Less Proposed Cost Sharing	_____	_____	_____
7. Carryover Funds (if any)			
a. Anticipated amount	_____	_____	_____
b. Amount used to reduce budget	_____	_____	_____
8. Total Estimated Costs	_____	_____	XXXXXXXXXX
APPROVED BUDGET	XXXXXXXXXX	XXXXXXXXXX	_____

Instructions

1. Provide a separate Budget Summary sheet for **each year** of the proposal research.
2. Grantee estimated costs should be entered in Column A. Columns B and C are for NASA use only. Column C represents the approved grant budget.
3. Provide in attachments to the budget summary the detailed computations of estimates in each category, along with any narrative explanation required to fully explain proposed costs.

----- ADDITIONAL INSTRUCTIONS ON FOLLOWING PAGE -----

INSTRUCTIONS FOR BUDGET SUMMARY

1. Direct Labor (salaries, wages and fringe benefits). Enclosures should list number and titles of personnel, amount of time devoted to the grant, and rates of pay.
2. Other Direct Costs.
 - a. Subcontracts - Enclosures should describe the work to be subcontracted, estimated amount, recipient (if known), and the reason for subcontracting this effort.
 - b. Consultants - Identify consultants to be used, why they are necessary, time to be spent on the project, and rates of pay.
 - c. Equipment - List separately and explain the need for items of equipment exceeding \$1,000. Describe the basis for the estimated cost.
 - d. Supplies - Provide general categories of needed supplies, the method of acquisition, estimated cost, and the basis for the estimate.
 - e. Travel - List the proposed trips individually, describe their purpose in relation to the grant, provide dates and destinations where known, and explain how the cost for each was derived.
 - f. Other - Enter the total of any other direct costs not covered by 2.a through 2.e. Enclose an itemized list explaining the need for each item and the basis for the estimate.
3. Indirect Costs. Identify indirect cost rate(s) and base(s) as approved by the cognizant Federal agency, including the effective period of the rate. If unapproved rates are used, explain why and include a computational basis for the indirect expense pool and corresponding allocation base for each rate.
4. Other Applicable Costs. Enter the total of any other applicable costs not covered by instructions 1 through 3. Enclose an itemized list explaining the need for each item and the basis for the estimate.
5. Subtotal -- Estimated Costs. Enter the sum of items 1, 2.a through 2.f, 3, and 4.
6. Less Proposed Cost Sharing (if any). Enter the amount proposed, if any. If cost sharing is based on specific cost items, identify each item and amount in enclosures.
7. Carryover Funds (if any). Enter the dollar amount of any funds that are expected to be available for carryover from the prior budget period.
8. Total Estimated Costs. Enter the total after subtracting items 6 and 7 from item 5.

CURRENT AND PENDING RESEARCH SUPPORT

Provide the following information for all current research support from all other sources. Also include the proposed project and all other research requiring a part of the PI's time. State the number of person months regardless of the source of the support.

Name of Principal Investigator _____

A. Current Support

1. Source of Support _____
2. Project Title _____
3. Award Amount _____
4. Period of Award _____
5. Person-Months _____

B. Pending Proposals (including supplement applications)

1. Source of Support _____
2. Project Title _____
3. Award Amount _____
4. Period of Award _____
5. Person-Months _____

Other Agencies to which this proposal, or parts thereof, has been submitted:

Duplicate this page as many times as needed to provide a complete list.

Certification Regarding Drug-Free Workplace Requirements Grantees Other Than Individuals

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988, 34 CFR Part 85, Subpart F. The regulations, published in the January 31, 1989 Federal Register, require certification by grantees, prior to award, that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the agency determines to award the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment (see 34 CFR Part 85, Sections 85.615 and 85.620).

This grantee certifies that it will provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing a drug-free awareness program to inform employees about -
 - The dangers of drug abuse in the workplace;
 - The grantee's policy of maintaining a drug-free workplace;
 - Any available drug counseling, rehabilitation, and employee assistance programs, and
 - The penalties that may be imposed upon employees for drug abuse violations in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will -
 - Abide by the terms of the statement; and
 - Notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction;
- (e) Notifying the agency within ten days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction;
- (f) Taking one of the following actions, within 30 days of receiving notice under subparagraph (d)(2) , with respect to any employee who is so convicted -
 - Taking appropriate personnel action against such an employee, up to and including termination; or
 - Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraph (a), (b), (c), (e), and (f).

Organization Name

PR/Award Number or
Proposal Name

Name and Title of Authorized Representative

Signature

Date

**Certification Regarding
Debarment, Suspension, and Other Responsibility Matters
Primary Covered Transactions**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 34 CFR Part 85, Section 85.510, Participant's responsibilities. The regulations were published as Part VII of the May 26, 1988 Federal Register (pages 19160-19211).

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
 - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
 - (d) Have not within three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Organization Name

PR/Award Number or Proposal Name

Name and Title of Authorized Representative

Signature

Date

Certification Regarding Lobbying

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000, and not more than \$100,000 for each such failure.

Organization Name

PR/Award Number or Proposal Name

Name and Title of Authorized Representative

Signature

Date